FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3080-0076 Est. lime per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - Conoral Informa	*ion															
Name and Mailing Address of Respondent	of Resp	ondent														
NE Colorado Celllular, Inc 1224 W Platte Ave Fort Morgan, CO 80701	ılar, I: 0701	nc												Check he is a chan address.	Check here if this is a change of address.	
2. Year Report Filed			3. Reporting	Period (Endi	Reporting Period (Ending Date of Pay	2		4. Number o	4. Number of Full-Time Employees during Selected	mployees dur	ing Selected					
2019			Period Co 1/6/2(Period Covered by Report) 1/6/2019-1/19/2019	9/2019			Reporting a. Fe b. 16	Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only) b. 16 or more (complete all sections)	k one): complete Sec plete all secti	itions I, IV, an	d V only)				
SECTION II - Full-Time Employees.	yees.															
								Num (Report empl	Number of Employees (Report employees in only one category)	yees one category						
dob									Race/Ethnicity	,						
Categories		Hispanic or	nic or						Not-Hispanic or Latino	ic or Latino						Total
			ā			Male	ale					Female	nale			Columns A - N
		Male	Female	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	
		A	в	C	Q	Е	Ŧ	6	н	1	٦	7	Ľ	Z	z	0
Executive/Senior Level Officials and Managers	7.7	1		9	1		1		1	3					ш	17
First/Mid-Level Officials and Managers	1.2	4	6	20						23					2	55
Professionals	N	_	-	10						3						15
Technicians	ω	ω		∞			_		1	2			1			16
Sales Workers	4	22	29	29	1		1	1	2	62			þred		1	149
Administrative Support Workers	Un	ω	22	4					1	30						60
Craft Workers	0	ы		11	-											14
Operatives	7															0
Laborers and Helpers	00															0
Service Workers	ဖ	-								1						2
TOTAL	6	37	58	91	w	0	υ,	1	s	124	0	0	2	0	4	328
PREVIOUS YEAR TOTAL	<u> </u>															0

SECTION III - Part-Time Employees.	loyees.															
								Num (Report empl	Number of Employees (Report employees in only one category)	yees one category						
dob	Г								Race/Ethnicity	,						
Categories		Hispanic or	nic or						Not-Hispanic or Latino	ic or Latino						Total
	Ι		Ī			Ma	Male					Female	nale			Columns
		Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races) 2
		A	В	C	0	п	п	ဝ	I	-	۲.	Σ.	г	3	z	0
Executive/Senior Level Officials and Managers	-1															0
First/Mid-Level Officials and Managers	1.2															0
Professionals	2															0
Technicians	ω															0
Sales Workers	4	4	v	W						C.)						15
Administrative Support Workers	Ŋ															0
Craft Workers	Ø															0
Operatives	7															0
Laborers and Helpers	α															0
Service Workers	9			1-1												1
TOTAL	10	4	S	4	0	0	0	0	0	3	0	0	0	0	0	16
PREVIOUS YEAR TOTAL	11															0
-1 ≦	minatio e Comm	n Complai	ints Pursuan	it to 47 CFR	22.321, 23.58	5, 90.168, 101.	4, and 101.3	11.								
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.	e Comm ny body I e Comm ting part	ission that having con ission that ites involve	no complaint npetent jurisd the following d, date filed,	ts regarding viction in such complaints a complaints a	riolations of the matters during illeging violations incies before	te equal emploing the calendate ons of the pro-	yment provis r year covere visions of any ter has been l	ions of Feder d by this repo equal employ heard, file nur	al, state, territ rt. /ment opportu nber or other	orial, or local inity statute hidesignation, a	statutes have ave been filed and current sta	tutes have been filed against this been filed against this company current status or disposition.	ainst this company.			
SECTION V - Certification I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct	owledge	, informati	on, and belief	f, all statemer	nts in this rep	ort are true and	d correct.									
Date 17 05/30/2019	yped or Shau	Shauna Geist	Typed or Printed Name of Person Signing Shauna Geist	n Signing		(0)	Signature		>	7		Ţ	Telephone No. (970) 467-3188	7_3188		
Title of Person Signing HR Director					MILLFULLY F	WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	MENTS MADE OR CONST	STRUCTION PE	ORM ARE PU	JNISHABLE E S.C. 312 (A)(1	3Y FINE AND	OR IMPRISO	NMENT (18)	U.S.C. 1001) 3).	AND/OR REV	CATION
TIV DIECKOI							0.00000	00000	- 1 70011 (47 0.0	3.0.012 (20)) AIRDION TO	ATO LOKE (47 0.5.0.50	ý.		